



Renton Police Department

Business Trespass Enforcement Authorization

(Please Print)

I / we _____

As Owner Manager Agent of the property named and located at:

(Name of Business)

(Address of business property)

In the City of Renton, do hereby request and authorize officers of the Renton Police Department, in their official police capacity, to go upon or within those common areas generally open to the public and/or tenants including hallways, stairwells, entrances, lawn, garden, driveways and parking lot areas. I further request and authorize officers to go in and on those areas not open to tenants (as tenants) furnace rooms, roof, storage rooms and separate office. This authority does not permit entry to the premises reserved exclusively for a separate tenant business.

I / we do not authorize any person(s) to use the premises for any purpose which is not directly related to the business(es) resident at the listed location. When the business(es) are closed, I / we do not authorize anyone to use the open areas for any purpose.

The purpose of this authority is to prevent criminal activity including trespassing, loitering, vandalism, theft, illegal drug trafficking and prostitution, which may be which may be occurring at the above described premises.

I have posted the property with signs stating " NO TRESPASSING/LOITERING. This is private property. Persons without specific business are not authorized to be on the premises. Violators are subject to arrest and/or citation for criminal trespass pursuant to Renton City Code #6-18-10", or words to that effect.

Officers are further authorized to act on my behalf in requesting unauthorized person(s) found upon the property without legitimate / lawful purpose to leave the premises.

I agree to fully cooperate in any subsequent prosecution of trespass and other criminal offenses and agree to appear in court to testify if necessary.

This authority will remain in effect until rescinded by written notice to the Chief of Police, Renton Police Department, 1055 South Grady Way, Renton WA 98055.

By signing below, requestor certifies that they have the authority to make this request and authorization.

Name of requestor #1	Address/Phone/Pager # - 24 hour contact number
Name of requestor #2	Address/Phone/Pager # - 24 hour contact number

Business Name	
Business Mailing Address	Business Phone

X _____
Signature of Requestor #1

Date: ____/____/____

X _____
Signature of Requestor #2

Date: ____/____/____

Signature checked by: _____ Date: _____